#### **GENERAL INFORMATION - MASSAGE THERAPIST LICENSE**

Access this form via website at: www.hawaii.gov/dcca/pvl

## MASSAGE THERAPY LAWS AND RULES:

Copies may be obtained by sending a written request and \$1.25 to Cashier, DCCA, P.O. Box 541, Honolulu, Hawaii 96809, or copies may be picked up at the Cashier's Office on the <u>3rd</u> Floor, 1010 Richards Street. Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Act may be purchased separately for 75¢. The licensee and the apprentice are held accountable for knowing and complying with the laws and rules as failure to comply may result in disciplinary action.

The LAWS and RULES are also posted on our website free of charge at: <a href="www.hawaii.gov/dcca/pvl">www.hawaii.gov/dcca/pvl</a>. Click on the specific board/program.

## NO RECIPROCITY:

Hawaii does <u>not</u> reciprocate with any other state or country. Each applicant is required to meet the education and training requirements according to Hawaii laws and rules. The Board does <u>not</u> have the authority to grant a waiver of any requirement. On-the-job work experience is <u>not</u> accepted.

## **APPLICATION DEADLINE:**

Your complete application must be <u>received</u> by the department <u>on or before</u> the State Board Deadline. Faxes are not accepted. (Please refer to the "Bulletin of Examination Information" or "Exam Schedule" for date.)

Failure to provide all the requested information will delay the processing of your application.

OR

Mail or deliver all required forms to:

Board of Massage Therapy DCCA, PVL Licensing Branch P.O. Box 3469 Honolulu, HI 96801 Deliver to office location at:

1010 Richards St., 1st Flr. Honolulu, HI 96813

Maui - 984-2400 ext. 6-3000 Phone: (808) 586-3000 Hawaii - 974-4000 ext. 6-3000 Molokai - 1-800-468-4644 ext

Molokai - 1-800-468-4644 ext. 6-3000 Lanai - 1-800-468-4644 ext. 6-3000

Kauai - 274-3141 ext. 6-3000

Toll free voice numbers for the neighbor islands:

## ADDRESS CHANGES:

It is your responsibility to keep the board informed of your address changes.

ABANDONMENT OF APPLICATION

You must submit all required documents and information within two years from the last date documents or information were requested or it will be considered abandoned and the Board may destroy it.

## **EXAMINATION INFORMATION**

Examinations are usually held during the months of March, June, September and December.

Upon approval of your application, an examination registration form will be sent to you. You must then complete the examination registration form, and send the form and exam fee to Experior Assessments, LLC (fka NAI Block). Please refer to the "Candidate Information Bulletin" for specific information, including information on studying for the exam.

At least ONE WEEK prior to the examination date, you will receive the "Admittance Slip" to the examination with other examination details. If you do not receive the admittance slip, contact Experior at (808) 261-8182.

Approximately 4 weeks after the exam, you will receive through the mail the results of the exam. To protect your privacy, results are not released over the phone. Applicants who are not successful in the exam may apply for re-examination directly with Experior. Passing candidates will receive with the notification of exam results information regarding submitting license fees that are due for issuance of a massage therapist license. Upon payment of the license fees, a license will be processed and subsequently mailed to you.

#### <u>FEES</u>

## APPLICATION FEE: Attach the nonrefundable \$50 application fee. Make check payable to: COMMERCE & CONSUMER AFFAIRS.

**Note:** One of the numerous legal requirements that you must meet in order for your new license to be issued is the payment of fees as set forth in this application. You may be sent a license certificate before the check you sent us for your required fees clears your bank. If your check is returned to us unpaid, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$15.00 service fee will be charged for checks which are returned by the bank.

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by Title 16, Chapter 201, Hawaii Administrative Rules, and/or Chapter 91, Hawaii Revised Statutes. Your written request for a hearing must be directed to the agency that denied your application, and must be made within 60 days of notification that your application for a license has been denied.

## **BIENNIAL RENEWAL**

All licenses are subject to renewal on or before <u>June 30 of each even-numbered year</u> regardless of when a new license is issued. If you are eligible for a license near a renewal date, you may consider applying for a license effective in the next license period. Please be aware, however, that you will not be licensed until the starting of the new license period or until the license fees are paid, whichever is later. License periods start July 1, even-numbered years and end June 30, odd-numbered years.

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request. MA-01a 0503R

## **REQUIREMENTS - MASSAGE THERAPIST LICENSE**

#### APPLICANTS ARE SUBJECT TO CURRENT LICENSURE REQUIREMENTS.

THE APPLICANT HAS THE BURDEN OF PROVING THAT HE/SHE MEETS LICENSING REQUIREMENTS. TO ENSURE THAT YOU RECEIVE PROPER CREDIT FOR YOUR COURSEWORK AND TO FACILITATE THE REVIEW OF YOUR APPLICATION, FOLLOW THE INSTRUCTIONS BELOW. AN INCOMPLETE APPLICATION WILL NOT BE APPROVED AND THIS WILL RESULT IN THE APPLICANT HAVING TO WAIT FOR A LATER EXAM DATE.

THE FOLLOWING IS A LIST OF DOCUMENTS WHICH MUST BE SUBMITTED. PLEASE BE ADVISED THAT CREDIT WILL BE GIVEN ONLY FOR THOSE COURSES THAT ARE <u>CLEARLY</u> DEFINED AND THAT MEET WITH THE BOARD'S LAWS AND RULES. IN ADDITION, ALL EDUCATION AND TRAINING MUST BE COMPLETED BY THE STATE BOARD DEADLINE. REFER TO THE CATEGORY WHICH IS APPLICABLE TO YOU.

- A. APPLICANTS WHO RECEIVED TRAINING UNDER THE HAWAII BOARD APPROVED APPRENTICESHIP PROGRAM:
  - Massage apprentice training report completed and notarized by the principal massage therapist and sponsoring massage therapist which shows that applicant successfully completed a minimum of 420 hours of apprenticeship training between a 6-to-12 month period. The training report shall show that the applicant received training as specified in Hawaii Administrative Rules, Section 16-84-23, <u>and</u>
  - Copy of front and back of current adult cardiopulmonary resuscitation (CPR) certificate by the American Red Cross or American Heart Association, <u>and</u>
  - 3. Completed "Application for Exam & License" (attached) <u>and</u> check payable to COMMERCE AND CONSUMER AFFAIRS in the amount specified on the attached *General Information* sheet.
- B. APPLICANTS WHO COMPLETED TRAINING AT A MASSAGE SCHOOL:
  - 1. Signed certificate and transcript which shows successful completion of (copies acceptable):
    - a. 50 hours of in-class coursework on human anatomy, physiology, and structural kinesiology and
    - b. 100 hours of in-class coursework on theory and demonstration of massage, and
    - A minimum of 420 hours of in-class practical massage training under the supervision of a teacher at the school, <u>and</u>
  - 2. School catalogue of course descriptions to describe the courses listed on your transcript. You may also submit a signed letter from an authorized person at the school to verify or clarify the contents of a particular course, <u>and</u>
  - Copy of front and back of current adult cardiopulmonary resuscitation (CPR) certificate by the American Red Cross or American Heart Association, <u>and</u>
  - 4. Letter or certificate from the department of education, American Massage Therapy Association, or the Rolf Institute to verify that the school attended was approved at the time of your graduation, **and**
  - Completed "Application for Exam & License" (attached) <u>and</u> check payable to COMMERCE AND CONSUMER AFFAIRS in the amount specified on the attached General Information sheet.
    - \* <u>CPR REQUIREMENT</u>: If you are submitting a CPR certificate other than the American Red Cross or American Heart Association, you must submit the following:
      - (1) Copy of your CPR certificate
      - (2) Written request for a waiver
      - (3) Curriculum of the CPR course
      - (4) Name and address of the course sponsor and
      - (5) All information pertaining to the course sponsor's credentials and accreditation. Board approval is required.

- **C.** APPLICANTS WHO COMPLETED AN AMERICAN MASSAGE THERAPY ASSOCIATION (AMTA) APPROVED MASSAGE THERAPY CURRICULUM OR THE ROLF INSTITUTE MASSAGE THERAPY CURRICULUM:
  - 1. Signed certificate and/or transcript which shows successful completion of a minimum of 570 hours of in-class massage therapy coursework, <u>and</u>
  - 2. School catalogue of course descriptions to describe the courses listed on your transcript. You may also submit a signed letter from an authorized person at the school to verify or clarify the contents of a particular course, <u>and</u>
  - 3. If attended an AMTA-approved curriculum, letter or certificate from the AMTA to verify that the curriculum completed was AMTA-approved at the time of your graduation, <u>and</u>
  - 4. Copy of front and back of current certificate of the adult cardiopulmonary resuscitation (CPR) from the American Red Cross or American Heart Association, <u>and</u>
  - 5. Completed "Application for Exam & License" (attached) <u>and</u> check payable to *COMMERCE AND CONSUMER AFFAIRS* in the amount specified on the attached *General Information* sheet.
- D. APPLICANTS WHO WERE TRAINED IN A FOREIGN COUNTRY:
  - 1. Documents as listed in paragraph B, nos. 1, 2, and 3 above, and
  - 2. Letter of certification from a governmental authority (e.g. Ministry of Education) of the country in which the school was licensed/located stating that the school was licensed/approved at the time of your graduation, <u>and</u>
  - 3. English translation of all documents (<u>attach</u> documents written in the foreign language), including affidavit (signature must be notarized), address, & phone number of translator, **and**
  - 4. Completed "Application for Exam & License" (attached) <u>and</u> check payable to *COMMERCE AND CONSUMER AFFAIRS* in the amount specified on the attached *General Information* sheet.
- **E.** APPLICANTS WHO PREVIOUSLY HELD HAWAII MASSAGE THERAPIST LICENSES AND WHO HAVE ALLOWED LICENSES TO BE FORFEITED FOR MORE THAN ONE YEAR, follow the requirements as listed under paragraph B, C, D, or the following (Please note: If you held a massage therapist license in Hawaii, but forfeited your license, you must meet the current requirements):
  - Certificate and/or transcript which shows successful completion of at least 50 hours of in-class coursework on human anatomy, physiology, and <u>structural</u> kinesiology <u>and</u> 100 hours of in-class coursework on theory and demonstration of massage, <u>and</u>
  - 2. Letter or certificate from the department of education, American Massage Therapy Association, or the Rolf Institute to verify that the school attended for No. 1 above was approved at the time of your graduation, **and**
  - 3. Massage apprentice training report completed and notarized by the principal massage therapist and sponsoring massage therapist which shows that applicant successfully completed a minimum of 420 hours of board-approved apprenticeship training between a 6-to-12 month period. The training report shall show that the applicant received training as specified in Hawaii Administrative Rules, Section 16-84-23, <u>and</u>
  - 4. Copy of <u>current</u> adult cardiopulmonary resuscitation (CPR) certificate by the American Red Cross or American Heart Association.
  - 5. Completed "Application for Exam & License" (attached) <u>and</u> check payable to *COMMERCE AND CONSUMER AFFAIRS* in the amount specified on the attached General Information sheet.
  - \* <u>CPR REQUIREMENT:</u> If you are submitting a CPR certificate other than the American Heart Association or American Red Cross, you must follow the procedure listed on the bottom of page 1.

# SUMMARY OF QUALIFICATIONS FOR HAWAII LICENSURE AS A MASSAGE THERAPIST

- Training Requirement: Totaling 570 hours as described below.
  - A. Human anatomy, physiology, and structural kinesiology in-class coursework: minimum of 50 hours.
  - B. Theory and demonstration of massage therapy in-class coursework: <u>minimum of 100 hours</u> (must include: the proper procedure in massaging which concerns the protection of both client and massage therapist; recordkeeping (clinical notes); hygiene; theory; technique for specific conditions; contraindications of massage for specific techniques according to conditions; draping; assessment of the client's condition and the general technique to be applied).
  - C. Practical training in <u>massage therapy</u>: <u>minimum of 420 hours</u> (Massage therapy means any method of treatment of the superficial soft parts of the body consisting of rubbing, stroking, tapotement, pressing, shaking, or kneading with the hands, feet, elbow, or arms).
    - Outside of Hawaii: Applicants must provide proof of successful completion of practical massage therapy training at an approved school. The school, at the time of attendance, must have been approved or licensed by an educational agency (or similar governmental authority), an accredited degree granting institution, or approved by the AMTA, or the Rolf Institute.

NOTE: Apprenticeship hours gained out-of-state (to meet Hawaii's training requirement) are not acceptable.

- 2. <u>Within the State of Hawaii</u>: Two (2) training options, including a combination of options, are available to people who train in Hawaii:
  - a. Apprenticeship option:

The apprentice must file a completed "Training Report" with appropriate notorized signatures after a period of Board registered apprenticeship based on filing a completed "Apprentice Registration Application" form and submit proof of 150 hours of coursework as outlined under A and B above.

b. School option:

Complete a minimum of 420 hours of practical massage therapy training in-class in an approved school. The school, at the time of attendance and graduation, must be licensed by the state department of education, an accredited degree granting institution, <u>or</u> AMTA-approved, <u>or</u> the Rolf Institute.

Applicants must submit proof of successful completion of the above coursework. Submit copies of certificates and transcripts which show the breakdown in hours in the above courses. Applicants should also submit copies of course descriptions or course outlines to support the certificates or transcripts. The applicant has the burden of proving that he/she meets licensure requirements.

Applicants must also submit verification that the institution is licensed or approved by an educational agency (or similar governmental authority), <u>or</u> an accredited degree granting institution, <u>or</u> approved by the American Massage Therapy Association (AMTA), <u>or</u> the Rolf Institute <u>or</u> the Hawaii Board of Massage Therapy. Applicants should contact the institution attended for this documentation (for example, a copy of the school license, itself, received from the state department of education or the AMTA, and etc.). If the school is unable to provide this documentation, the applicant should contact the state department of education, or AMTA, and etc., for a letter to verify licensure/approval of the school at the time the applicant attended and graduated. Third-party proof is not needed if the accredited university, college, or school is listed in American Council on Education's directory of <u>Accredited Institutions of Post-Secondary Education</u>.

- II. <u>Current certificate of cardio-pulmonary resuscitation (CPR)</u> training from the American Red Cross (ARC) or the American Heart Association (AHA) must be presented by the applicant at the time of application for the massage therapy examination and license. An applicant may submit a CPR certificate other than the ARC or AHA by requesting a waiver <u>and</u> submitting a copy of the CPR certificate, curriculum of the CPR course, name and address of the course sponsor, and all information pertaining to the course sponsor's credentials and accreditation. Board approval is required.
- III. File a completed Massage Therapist (MAT) application by the application filing deadline for Board action to be eligible for examination. The MAT application packet contains instructions, application form and the "Training Report" form used to verify Board registered apprenticeship training.
- IV. Written exam: All applicants must pass a written exam administered in Hawaii only.
- V. <u>Licensure:</u> Those with passing scores become eligible for licensure upon payment of the appropriate fees. Re-exam candidates deal directly with the testing agency.

NOTICE: The above requirements are subject to change at any time. Applicants must meet current licensure requirements. The Board will not waive any of the requirements and there is no "grandfather" provision.

## DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS BOARD OF MASSAGE THERAPY 1010 Richards Street, P.O. Box 3469 Honolulu, Hawaii 96801

APPLICATION FOR EXAM & LICENSE - MASSAGE THERAPIST				Date Effective		License No. MAT -	
Type or print legibly in <b>black ink</b> . Failure to provide all the requested information will delay the processing of your application.				Approved	Ineligit	ole Initial	ls/Date
Lega	al Name (First, Middle)	(Last)	ONLY				
Res	idence Address (Include apt. no., city, state & zip co	I de) - REQUIRED	OFFICE USE				
Mail	ing Address (ONLY if other than residence address)		FOR 0				
Soc	ial Security No.	Phone No. (days)					
Other Names Used (include maiden name):			Date	of Exam Applying F	or		
Circle	e answers & give details when asked to:		1				
1)	Are you at least 18 years of age?					YES	NO 8
2)	) Are you a U.S. citizen, a U.S. national, or an alien authorized to work in the United States?						NO
3) Have you ever held a massage therapist or apprentice permit in Hawaii?						YES	NO NO
4) a.	)a. Was any license ever revoked, suspended or otherwise subject to disciplinary action?						S NO
b.	b. Are you presently being investigated or is any disciplinary action pending against you?						NO
5)	In the past 20 years have you ever been convicted of a crime in which the conviction has not been annulled or expunged?						S NO
Affic	lavit of Applicant:						
that crimi	misrepresentation is grounds for refusal or	nts contained in this application and on the doc subsequent revocation of license (Sec. 452- vised Statutes). I further certify that I have re	-24,	Hawaii Revised	Statutes	), and/or gro	unds for
	Date		Signa	ature of Applicar	nt		
				Lic CRF ½ Rene	ewal	295	\$25 \$35/70 \$25

(CONTINUED ON BACK)

EXPLANATIONS:			
INCOMPLETE APPLICATION WILL RESULT IN THE APP			IT. THIS

## HAVE YOU REMEMBERED TO:

- 1. Sign your application.
- 2. Attach your check made payable to COMMERCE AND CONSUMER AFFAIRS in the amount of \$50 (nonrefundable application fee.)
- 3. Attach all required training documents as listed under paragraphs A, B, C, D, or E, whichever applies to you, including verification of current CPR.

## TRAINING REPORT - MASSAGE THERAPIST APPRENTICE

FOR COMPLETION BY THE APPRENTICE'S PRINCIPAL MASSAGE THERAPIST AND SPONSORING MASSAGE THERAPIST. If it is the same person, complete both affidavits. Principal and Sponsoring Massage Therapists must be licensed throughout apprenticeship period. EVERY BLOCK ON TRAINING REPORT MUST BE COMPLETED.

Full Name of Apprentice (First, Middle)		(Last)	(Last)				
Apprentice Effective date of permit Permit No.			Date applicant completed training described below		TOTAL TRAINING TIME: (Must be at least 6 months) mos.		
Describe course of study; refer to Hawaii Administrative Rules, §16-84- List massage therapy techniques taught:		-84-23(j)(1)(2)(3);			Hours spent in this area:		
			TOTAL HO	OURS:			
TSIc	Name of Sponsoring	Massage Therapist (First-MI-Last)		License No.		Expiration Date of License:	
SPONSORING MASSAGE THERAPIST	Affidavit of Sponsoring Massage Therapist:  I hereby certify that the answers and statements contained in this application and on the documents attached are true and correct. I understand that misrepresentation is grounds for refusal or subsequent revocation of permit (Sec. 452-24, Hawaii Revised Statutes), and/or grounds for criminal prosecution (Sec. 710-1017, Hawaii Revised Statutes). I further certify that I have read, understand, and shall obey all laws and rules pertaining to the Board of Massage Therapy.  Subscribed and sworn to before me the  day of  Signature of Sponsoring Therapist						
SPONSOR	Notary Public, State o	f		Signature	эг эропзог	ing merapist	
APIST	Name of Principal Ma	ssage Therapist (First-MI-Last)		License No.		Expiration Date of License	
PRINCIPAL MASSAGE THERA	Affidavit of Principal Massage Therapist:  I hereby certify that the answers and statements contained in this application and on the documents attached are true and correct. I understand that misrepresentation is grounds for refusal or subsequent revocation of permit (Sec. 452-24, Hawaii Revised Statutes), and/or grounds for criminal prosecution (Sec. 710-1017, Hawaii Revised Statutes). I further certify that I have read, understand, and shall obey all laws and rules pertaining to the Board of Massage Therapy.						
	Subscribed and sworr	to before me the, 20		Signature o	of Principa	l Therapist	
PRIN	Notary Public, State o My commission expire	f					